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CONFIRMATION NO. 1514

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/614,543	<b>FILING OR 371(c) DATE</b> 07/03/2003 <b>RULE</b> 1.47	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> ICUMM1.4CP1RE
<b>APPLICANTS</b> Mark J. Burzynski, Residence Not Provided; Alexander K. Jones, Residence Not Provided; Richard S. Kearns, Seattle, WA; John M. Polidoro, Residence Not Provided; Carl R. Sahi, Residence Not Provided; Chad C. Smutney, Residence Not Provided;				
<b>** CONTINUING DATA *****</b> This application is a REI of 09/360,877 07/23/1999 PAT 6,254,574 which is a CIP of 08/772,002 12/19/1996 PAT 5,951,520				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/13/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 66
				<b>INDEPENDENT CLAIMS</b> 10
<b>ADDRESS</b> 20995				
<b>TITLE</b> Self-blunting needle medical devices and methods of manufacture thereof				
<b>FILING FEE RECEIVED</b> 2332	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	